

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>PH</i>	<i>10971</i>	<i>8/17</i>
O.L.P.E. CLASSIFIER		<i>48</i>	<i>8/2/60</i>
FORMALITY REVIEW	<i>AS</i>	<i>313</i>	<i>9-21-00</i>
RESPONSE FORMALITY REVIEW	<i>LH</i>	<i>60105</i>	<i>3-1-01</i>

INDEX OF CLAIMS

✓ _____ Rejected N _____ Non-elected
• _____ Allowed I _____ Interference
- (Through numeral) _____ Canceled A _____ Appeal
+ _____ Restricted O _____ Objected

Claim	Final	Original	Date
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If more than 150 claims or 10 actions
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